

# Montana Diabetes Program

## BURDEN FACTS

- Diabetes increases the risk of heart disease, stroke, kidney failure, influenza, and pneumonia. It also can lead to blindness, amputations, and pregnancy complications.
- In 2013, over 59,000 Montana adults aged 18 years were diagnosed with diabetes.
- Screening for gestational diabetes is often missed or delayed because women do not receive adequate prenatal care.
- A person with diabetes has about 2.3 times the average annual health care cost of a person without diabetes.

## CONTACT

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## PROGRAM ACTIVITIES

- The **Montana Diabetes Program** is committed to:
  - Reduce the morbidity and mortality of diabetes and its complications among Montanans.
  - Prevent or delay the development of type 2 diabetes among Montanans at high risk.
  - Improve the quality of life of all Montanans with diabetes.
- The **Montana Diabetes Advisory Coalition** has been actively engaging partners since 1995 to discuss current issues in diabetes and set key priorities. It has about 40 members representing a variety of stakeholders, organizations, and agencies statewide.
- The **Montana Diabetes Prevention Program (DPP)** is an evidence-based program that aims to reduce the incidence of diabetes in people at high risk for developing the disease. The 10-month intensive lifestyle intervention focuses on weight loss, physical activity and behavior change. The program in Montana began in 2008 and has received national recognition. Close to 1,000 participants enroll in DPP annually at the 18 sites that deliver the curriculum, including telehealth delivery to frontier communities.
- **Quality Improvement** interventions and the Diabetes Quality Care Monitoring System (DQCMS) assist primary care practices in practicing evidence-based medicine, tracking diabetes management, and improving outcomes for over 12,000 Montanans with diabetes. Target areas are:
  - A1C, blood pressure and cholesterol levels
  - Preventive services (e.g., tobacco cessation, immunizations)
  - Screenings (e.g., diabetes, chronic kidney disease)
  - Self-management education (e.g., medications, foot care).
- The **Quality Diabetes Education Initiative (QDEI)** aims to increase access to diabetes self-management education (DSME), which is an integral component of diabetes care. Two main strategies are to:
  - Offer a multi-tiered, self-study and peer-mentoring program to health professionals interested in increasing their skills and knowledge as well as those pursuing the Certified Diabetes Educator (CDE) credential.
  - Provide technical assistance to support outpatient sites in developing a DSME program and becoming recognized or accredited.

## RESOURCES

- Visit our website for more information: [www.diabetes.mt.gov](http://www.diabetes.mt.gov)